**FEC** 

Only

## STATEMENT OF

PAGE 1 / 4

**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Joe Kent for Congress PO Box 2133 ADDRESS (number and street) (Check if address is changed) **Battle Ground** 98604 WA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS tcdatwyler@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.joekentforcongress.com (Check if address is changed) DATE 2021 C00771394 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Datwyler, Thomas, C,, Type or Print Name of Treasurer Datwyler, Thomas, C,, [Electronically Filed] 80 2021 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

ı	FEC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
		COMMITTEE  Committee:	
(a)	x	This committee is a principal campaign committee. (Complete the candidate information below	.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Corinformation below.)	nplete the candidate
Name Cand	e of Iidate	Kent, Joseph, Clay, ,	
	lidate Affiliati	on REP Office Sought: X House Senate President	State WA District 03
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Parl	ty Con	nmittee:  (National, State	(Democratic,
(d)		This committee is a or subordinate) committee of the	Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a:
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Func	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate	·
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

Write or Type Committee Name  Joe Kent for Congress 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership PAC Sponsor  Kent Sabattini Joint Victory Committee  Mailing Address  B7  Falls Church  CITY  STATE  ZIP CODE  Relationship: Connected Organization Affiliated Committee  Leadership PAC Sponso  Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.  Full Name  Mailing Address  PO Box 183  Treasurer: List the name and address (phone number optional) of the treasurer of the committee: and the name and address of any designated agent (e.g., assistant treasurer).  Full Name  Oatwyler, Thomas, C.,	FEC <b>Form 1</b> (Revised	02/2009)	Page <b>3</b>
Affiliated Committee  Mailing Address  6. Name of Any Connected Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership PAC Sponsor  Kent Sabatini Joint Victory Committee  Mailing Address  6269 Leasburg Pike  CITY STATE ZIP CODE  Relationship: Connected Organization Affiliated Committee			. age <b>c</b>
S. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor  Kent Sabatini Joint Victory Committee  Mailing Address  6269 Leasburg Pike  Mailing Address  6269 Leasburg Pike  CITY  STATE  ZIP CODE  Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor  Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.  Datwyler, Thomas, C.,  Full Name  Datwyler, Thomas, C.,  Title or Position  CITY  STATE  ZIP CODE  Treasurer: List the name and address (phone number optional) of the treasurer of the committee: and the name and address of any designated agent (e.g., assistant treasurer).  Full Name  Datwyler, Thomas, C.,  It reasurer List the name and address (phone number optional) of the treasurer of the committee: and the name and address of any designated agent (e.g., assistant treasurer).  Full Name  Datwyler, Thomas, C.,  It reasurer List the name and address (phone number optional) of the treasurer of the committee: and the name and address of any designated agent (e.g., assistant treasurer).  Full Name  Datwyler, Thomas, C.,  It reasurer List the name and address (phone number optional) of the treasurer of the committee: and the name and address of any designated agent (e.g., assistant treasurer).  Full Name  Datwyler, Thomas, C.,  STATE  ZIP CODE			
Kent Sabatini Joint Victory Committee  Mailing Address  B7 Falls Church CITY STATE ZIP CODE  Relationship: Connected Organization Affiliated Committee   Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.  Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.  Full Name PO Box 183 Mailing Address  Title or Position CITY STATE ZIP CODE  Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name Obtwyler, Thomas, C., of Treasurer Datwyler, Thomas, C., of Treasurer Mailing Address  PO Box 183  Hudson CITY STATE ZIP CODE  Title or Position		<del>_</del>	or Leadership PAC Sponsor
Mailing Address    Address   B7			or readership i no oponsor
Relationship: Connected Organization Affiliated Committee  Joint Fundraising Representative Leadership PAC Sponse  Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.  Datwyler, Thomas, C., Full Name  PO Box 183  Mailing Address  PO Box 183  Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name  Datwyler, Thomas, C., Full Name  Telephone number  715	Kent Sapatini Joint VI	ctory Committee	
Relationship: Connected Organization Affiliated Committee  Joint Fundraising Representative Leadership PAC Sponse  Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.  Datwyler, Thomas, C., Full Name  PO Box 183  Mailing Address  PO Box 183  Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name  Datwyler, Thomas, C., Full Name  Telephone number  715			
Relationship: Connected Organization Affiliated Committee	Mailing Address	6269 Leesburg Pike	
CITY STATE ZIP CODE  Relationship: Connected Organization Affiliated Committee  Joint Fundraising Representative Leadership PAC Sponsor  Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.  Datwyler, Thomas, C, ,  Full Name  PO Box 183  Mailing Address  PO Box 183  Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name  Datwyler, Thomas, C, ,  of Treasurer  Mailing Address  PO Box 183  Hudson  WI  54016  CITY  STATE  ZIP CODE  Title or Position  CITY  STATE  ZIP CODE	J	B7	
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor.  Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.  Datwyler, Thomas, C, ,  Full Name PO Box 183  Mailing Address  Hudson CITY STATE ZIP CODE  Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name of Treasurer  Mailing Address  PO Box 183  Hudson WI 54016  Title or Position  CITY STATE ZIP CODE  Treasurer  Mailing Address  PO Box 183  Hudson WI 54016  STATE ZIP CODE		Falls Church VA	22044
Relationship: Connected Organization Affiliated Committee		CITY STATE	ZIP CODE
Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.  Datwyler, Thomas, C.,  Full Name  PO Box 183  Mailing Address  PO Box 183  Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name of Treasurer  Mailing Address  PO Box 183			. 🗖
Datwyler, Thomas, C, , Full Name Mailing Address PO Box 183 Hudson Hudson Title or Position CITY STATE ZIP CODE Treasurer Telephone number Telephone number Telephone number Title committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name of Treasurer Mailing Address PO Box 183  PO Box 184  PO Box 184  PO Box 185  PO Box 185	Relationship: Connecte	ed Organization Attiliated Committee	Leadership PAC Sponsor
Mailing Address  Hudson  CITY  STATE  ZIP CODE  Treasurer  Telephone number  Telepho	books and records.  Datwyler,		
Title or Position  CITY  STATE  ZIP CODE  Treasurer  Telephone number  Title or Position  Datwyler, Thomas, C, ,  of Treasurer  Mailing Address  PO Box 183  Hudson  WI   54016  CITY  STATE  ZIP CODE	Mailing Address	PO Box 183	
Title or Position  CITY  STATE  ZIP CODE  Treasurer  Telephone number  Title or Position	J		
Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name of Treasurer  Mailing Address  PO Box 183  Hudson  WI 54016  CITY STATE ZIP CODE  Title or Position		Hudson	54016
Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name of Treasurer  Mailing Address  PO Box 183  Hudson  WI 54016  CITY STATE ZIP CODE	<b>T</b> U <b>D</b> U		
Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name of Treasurer  Mailing Address  PO Box 183  Hudson  CITY  STATE  ZIP CODE  Title or Position	Title or Position	CITY STATE	ZIP CODE
any designated agent (e.g., assistant treasurer).  Full Name of Treasurer  Mailing Address  PO Box 183  Hudson  CITY  STATE  ZIP CODE  Title or Position	Treasurer	Telephone number	15 338 - 8544
of Treasurer  Mailing Address  PO Box 183  Hudson  CITY  STATE  ZIP CODE  Title or Position			and the name and address of
Mailing Address  PO Box 183  Hudson  CITY  STATE  ZIP CODE  Title or Position		Thomas, C, ,	
Hudson WI 54016 - CITY STATE ZIP CODE Title or Position		IPO Box 183	
CITY STATE ZIP CODE Title or Position	Mailing Address		
CITY STATE ZIP CODE Title or Position		Li liudoon	154040
Title or Position			
Telephone number 713 - 336 - 3344	Title or Position Treasurer	. 7	21P CODE 15 - 338 - 8544

FEC Form 1	1 (Revised 02/2009)	Page 4
Full Name of		<u> </u>
Designated Agent		
Mailing Address		
	CITY STATE Z	IP CODE
Title or Position		
Name of Bank, Dep	es or maintains funds. pository, etc.  Wells Fargo	
Name of Bank, Dep	pository, etc.	
Name of Bank, Dep	Wells Fargo  1411 NW 1st St  Battleground  WA  98604	ZIP CODE
Name of Bank, Dep	Wells Fargo  1411 NW 1st St  Battleground  CITY  STATE  Z	
Name of Bank, Dep  Mailing Address  Name of Bank, Dep	Wells Fargo  1411 NW 1st St  Battleground  CITY  STATE  Z	ZIP CODE
Name of Bank, Dep  Mailing Address  Name of Bank, Dep	Wells Fargo  1411 NW 1st St  Battleground  CITY  STATE  Z  pository, etc.	ZIP CODE
Name of Bank, Dep  Mailing Address  Name of Bank, Dep	Wells Fargo  1411 NW 1st St  Battleground  CITY  STATE  Z  Chain Bridge Bank	ZIP CODE
Name of Bank, Dep  Mailing Address  Name of Bank, Dep	pository, etc.  Wells Fargo  1411 NW 1st St  Battleground  CITY  STATE  Z  pository, etc.  Chain Bridge Bank  1445A Laughlin Avenue	ZIP CODE
Name of Bank, Dep  Mailing Address  Name of Bank, Dep	Wells Fargo  1411 NW 1st St  Battleground  CITY  STATE  Z  Chain Bridge Bank	ZIP CODE